

TRANSCRIPT PREPARED BY THE CLERK OF THE LEGISLATURE  
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June 5, 1997

LB 517A, 798

voting.

SPEAKER WITHEM: LB 517A passes with the emergency clause attached. Vote on LB...excuse me, Mr. Clerk, I believe you have a motion on (LB) 798?

CLERK: Senator Wesely would move to return the bill.

SPEAKER WITHEM: Senator Wesely.

SENATOR WESELY: Thank you, Mr. Speaker, members. I'm just going to take a couple minutes to make one last comment about 798 and I'll leave the amendment up if others wish to say a few words. I know there's a desire to move forward and finish off the agenda and the work for the day. (LB) 798 represents an issue that I've worked on now since 1979 and I was going through some old files and reminiscing a bit about the battles we've fought, but it's kind of an interesting...when you have that long a history with an issue it does mean a lot when the issue is taken up as it is and changed so much as LB 798 proposes to do. In 1979, when we fought the battle and won it to establish a strong certificate-of-need law, it was one of the, I think, brighter moments in the legislative process and one that was heralded across the state, and in fact was the subject of a national article about Nebraska and it's leadership on it. But from that moment on, we've had one year after another, one bill after another which attempted to chip away at it, and we saw in 1981 some changes and others that have occurred every few years afterwards. And so the bill that we passed in 1979 never had the chance to fully have the impact I thought it could have had in reducing the number of costly expenditures in health care. So today, and we stand as the number one state in nursing home beds per elderly. We stand as number four in hospital beds per population and so we are overbedded in both areas. The moratorium in the bill continues and that's a good element of the bill, but the...it's almost too late. The barn door has been opened and we've released a lot of expenditures that didn't need to be released. Over the years I've fought back to try and keep it from being harmed any further, but every so often legislation would pass and it would be, again, diminished in scope. This bill, of course, pretty much finishes the job with very little left to try and hold the line on health care costs.